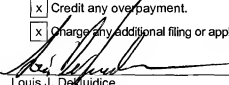


| AMENDMENT TRANSMITTAL LETTER | | | | Docket No. 09871/0200096-US0 | |
|--|---|---|-----------------------------------|---------------------------------|-------------|
| Application No. 10/676,327-Conf. #6524 | Filing Date September 30, 2003 | Examiner T. J. Stigell | Art Unit 3763 | | |
| Applicant(s): Minoru Takatsuka et al. | | | | | |
| Invention: ELECTRIC SYRINGE FOR DENTAL ANESTHETIC | | | | | |
| TO THE COMMISSIONER FOR PATENTS | | | | | |
| Transmitted herewith is an amendment in the above-identified application. | | | | | |
| The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | Rate | |
| Total Claims | 21 | - 22 = | 0 | x 50.00 | 0.00 |
| Independent Claims | 4 | - 4 = | 0 | x 210.00 | 0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | |
| Other fee (please specify): | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: | | | | | 0.00 |
| <input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity | | | | | |
| <input checked="" type="checkbox"/> No additional fee is required for this amendment. | | | | | |
| <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. | | | | | |
| <input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed. | | | | | |
| <input type="checkbox"/> Payment by credit card. | | | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-0100</u> as described below. | | | | | |
| <input checked="" type="checkbox"/> Credit any overpayment. | | | | | |
| <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. | | | | | |
|  Louis J. DelGuidice Attorney Reg. No.: 47,522 | | | | Dated: <u>January 3, 2007</u> | |
| DARBY & DARBY P.C. P.O. Box 770 Church Street Station New York, New York 10008-0770 (212) 527-7791 | | | | | |